

Govt control of health boards shocks lobbyists

Kamala Hayman

A patients' lobby group is shocked to hear that district health board (DHB) members — even those elected by the public — are by law accountable only to the health minister.

Health Cuts Hurt said this was not widely known by voters nor even by some board members despite being the case since health boards were established in 2001.

Under the 2004 Crown Entities Act — which replaced similar clauses in the Public Health and Disability Act — both elected and appointed members of the country's 21 district health boards are individually and collectively accountable to the health minister.

The minister has far-reaching powers to direct the board and, under limited circumstances, can dismiss members including those publicly elected.

Such strict ministerial accountability made the health board elections "a farce", said Health Cuts Hurt spokeswoman Eleanor Carter. "The public expects the candidates that they vote for to represent them, the voters. What on earth is the point in voting if the elected candidates are prevented from representing their voters in order to implement the current government's policy?"

"How does a board member feel when they are told by the minister, upon being elected, that they now work for her and not for the people who elected them?"

Last August, former board member and respected general surgeon Associate Professor Philip Bagshaw condemned health boards as "merely window dressing" for decisions made centrally by the Health Ministry and called for them to be reformed or scrapped.

However, Health Minister Annette King's office said boards had to be directly accountable to her because they managed central government funds. This was in contrast to local government which

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Eleanor Carter
spokeswoman
Health Cuts Hurt

raised local rates and was "therefore accountable to ratepayers".

The Public Health and Disability Act 2000 also called on DHBs "to provide a community voice".

Powers to dismiss board members had never been used, although financial advisers had been appointed to three district health boards: Otago in 2003, Southland in 2004 and Auckland in January this year.

Questions about the public accountability of health board members were first asked in 2001 when the Canterbury DHB, like others, adopted a policy which allowed only its chairman, Syd Bradley, to make public statements outside formal board meetings.

The policy has not been discussed by the board since last year's election. However, new questions about democratic accountability have been raised.

Former city councillor and Canterbury DHB member Alister James — who believed elected members could and should be accountable to both the minister and the public — called for a policy of no surprises at his first board meeting. "Board members should not have to learn about issues by reading about them in The Press," said James.

Despite this, a number of key health issues were not brought to the board's attention before appearing in The Press.

● In December, CDHB managers



Alister James

proposed axing the loss-making community midwifery service operating out of Rangiora, Burwood, and Christchurch Women's hospitals, without first advising the board.

● Severe and chronic overcrowding in Hillmorton Hospital's acute wards prompted high-level meetings between clinical leaders and budget managers but was not brought to the board for discussion until after appearing in The Press.

● Research showing that hundreds of elective surgery patients were seeking emergency care for their conditions was not shown to board members.

Canterbury DHB member Laurence Malcolm pointed out that the board had shown it was able to respond to community concerns by halting a management bid to scrap the community midwifery service.

Auckland University health management lecturer and former hospital manager Rod Perkins said health boards played "a very important symbolic role".

Canterbury University law professor John Burrows said the Crown Entities Act, which incorporated universities and other such public institutions, was "evidence of an increasing desire by central government to control what's going on".

A three-year Victoria University study into how well district health boards are functioning is due to be released this year.

● The Canterbury DHB is seeking views on its five-year draft strategic plan in a series of public meetings kicking off on Tuesday evening in Rangiora. Meetings are also planned for Kaikoura (Friday), Akaroa (May 17), Christchurch (May 20 and May 24), and Ashburton (May 27). The plan can be seen at www.cdhb.govt.nz